

July 31, 2008

Ms. Marlene H. Dortch
Secretary
Federal Communications Commission
445 12th Street, S.W.
Washington, D.C. 20554

Re: Station KNVA-DT
Austin, Texas
File No. BPCDT-20080606AAC
Facility ID No. 144
Stop Code 1800E1

Dear Ms. Dortch:

This is written on behalf of 54 Broadcasting, Inc. ("54"), the licensee of Station KNVA-DT, Austin, Texas.

Pursuant to Section 73.1620(a) of the Commission's Rules, 54 wishes to report to the Commission that the Station has commenced program test operations, under the above-referenced construction permit, on July 31, 2008. An application for a license to cover the construction permit will be filed within 10 days of the commencement of program test operations.

Should there be any questions concerning this matter, please communicate with the undersigned.

Respectfully submitted,



Barry A. Friedman

cc: Mr. Mark Goldberg (For Public Inspection)

15759

MEMORANDUM

August 8, 2008

TO: Mark Goldberg

CC:

FROM: Barry A. Friedman

RE: Station KNVA-DT

Enclosed please find the application filed today with the FCC requesting a license to cover the maximization of KNVA-DT.

Would you lodge a copy in the KNVA public inspection file.

If you have any questions, do let me know.

Enclosure

Barry.Friedman@ThompsonHine.com Phone 202.973.2789 Fax 202.331.8330

Federal Communications Commission Washington, D.C. 20554 FCC 302-DTV	Approved by OMB 3060-0837 (June 2002) FOR FCC USE ONLY
APPLICATION FOR DIGITAL TELEVISION BROADCAST STATION LICENSE Read INSTRUCTIONS Before Filling Out Form	FOR COMMISSION USE ONLY FILE NO. - 20080808ACP

Section I - General Information

1.	Legal Name of the Applicant 54 BROADCASTING, INC.		
	Mailing Address 901 W. MARTIN LUTHER KING, JR.		
	City AUSTIN	State or Country (if foreign address) TX	ZIP Code 78701 -
	Telephone Number (include area code) 5124785400		E-Mail Address (if available)
	FCC Registration Number: 0006564959	Call Sign KNVA-DT	Facility Identifier 144
2.	Contact Representative (if other than Applicant) BARRY A. FRIEDMAN		Firm or Company Name THOMPSON HINE LLP
	Telephone Number (include area code) 2023318800		E-Mail Address (if available) BARRY.FRIEDMAN@THOMPSONHINE.COM
3.	If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114): <input type="radio"/> Governmental Entity <input type="radio"/> Noncommercial Educational Licensee/Permittee <input type="radio"/> Other <input checked="" type="radio"/> N/A (Fee Required)		
4.	Facility Information:		
	a. <input checked="" type="radio"/> Commercial <input type="radio"/> Noncommercial		
	b. <input checked="" type="radio"/> Main <input type="radio"/> Auxiliary		
	c. Community of License:		
	City: AUSTIN		State: TX
5.	Program Test Authority:		
	<input type="radio"/> Requesting program test authority.		
	<input type="radio"/> Station operating pursuant to automatic program test authority (47 C.F.R. Section 73.1620(a)(1)).		
6.	Purpose of Application:		
	<input checked="" type="radio"/> Cover construction permit (list original construction permit file number -- starts with the prefix BPCDT, BPEDT, BMPCDT or BPMEDT):		BPCDT- 20080606AAC
	<input type="radio"/> Modify an authorized license (list license file number -- starts with the prefix BLCDT, BMLCDT or BMLEDT):		-
	<input type="radio"/> Amend a pending application If an amendment, submit as an Exhibit a listing by Section and Question Number the portions of the pending application that are being revised.		[Exhibit 1]

NOTE: In addition to the information called for in this section, an explanatory exhibit providing full particulars must be submitted for each question for which a "No" response is provided.

Section II - Legal

1.	Certification. Licensee/Permittee certifies that it has answered each question in this application based on its review of the application instructions and worksheets. Licensee/Permittee further certifies that where it has made an affirmative certification below, this certification constitutes its representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets.	<input checked="" type="radio"/> Yes <input type="radio"/> No
2.	Licensee/Permittee certifies that all terms, conditions, and obligations set forth in the underlying construction permit have been fully met.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 2]
3.	Licensee/Permittee certifies that, apart from changes already reported, no cause or circumstance has arisen since the grant of the underlying construction permit which would result in any statement or representation contained in the construction permit application to be now incorrect.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 3]
4.	Character Issues. Licensee/Permittee certifies that neither licensee/permittee nor any party to the application has or has had any interest in, or connection with: a. any broadcast application in any proceeding where character issues were left unresolved or were resolved adversely against the applicant or party to the application; or b. any pending broadcast application in which character issues have been raised.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 4]
5.	Adverse Findings. Licensee/Permittee certifies that, with respect to the licensee/permittee and any party to the application, no adverse finding has been made, nor has an adverse final action been taken by any court or administrative body in a civil or criminal proceeding brought under the provisions of any law related to the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 5]
6.	Anti-Drug Abuse Act Certification. Licensee/Permittee certifies that neither licensee/permittee nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.	<input checked="" type="radio"/> Yes <input type="radio"/> No
I certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations. I hereby waive any claim to the use of any particular frequency as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and request an authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)		
Typed or Printed Name of Person Signing FRANK GOLDBERG		Typed or Printed Title of Person Signing PRESIDENT
Signature		Date 8/8/2008

Section III - Engineering**TECHNICAL SPECIFICATIONS**

Ensure that the specifications below are accurate. Contradicting data found elsewhere in this application will be disregarded. All items must be completed. The response "on file" is not acceptable.

TECH BOX

1.	Channel: 49	
2.	Operating Constants	
	Transmitter power output (average power at input to transmission line, after any filter attached to the transmitter, if used)	Transmission line power loss
	13.87 dBk 24.4 kW	1.19 dB

Antenna Input power	Maximum antenna power gain	Maximum effective radiated power
12.68 dBk	14.31 dB	27 dBk 500 kW

3. Antenna Data

Manufacturer DIE	Model TFU-30GTH O4
---------------------	-----------------------

NOTE: In addition to the information called for in this section, an explanatory exhibit providing full particulars must be submitted for each question for which a "No" response is provided.

CERTIFICATION

4. Main Studio Location. The main studio location complies with 47 C.F.R. Section 73.1125.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 6]
5. Constructed Facility The facility was constructed as authorized in the underlying construction permit or complies with 47 C.F.R. Section 73.1690.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 7]
6. Special Operating Conditions. The facility was constructed in compliance with all special operating conditions, terms, and obligations described in the construction permit. An exhibit may be required. Review the underlying construction permit	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 8]
7. Transmitter. The transmitter complies with 47 C.F.R. Section 73.1660.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 9]

APPLICATION FILED PURSUANT TO 47 C.F.R. SECTIONS 73.1675(c) OR 73.1690(c).

Only applicants filing this application pursuant to 47 C.F.R. Sections 73.1675(c) or 73.1690(c) must complete the following section.

8. Changing transmitter power output. Is this application being filed to authorize a change in transmitter power output caused by the replacement of an omnidirectional antenna with another omnidirectional antenna or an alteration of the transmission line system? See 47 C.F.R. Sections 73.1690(c)(1) and (c)(10).	<input type="radio"/> Yes <input type="radio"/> No
9. Replacing a directional antenna. Is this application being filed pursuant to 47 C.F.R. Section 73.1690(c)(3) to replace a directional antenna with another directional antenna? If "Yes" to the above, the applicant certifies the following:	<input type="radio"/> Yes <input type="radio"/> No
a. Pattern of Directional Antenna. The proposed theoretical antenna pattern complies with 47 C.F.R. Section 73.1690(c)(3). Exhibit is required.	<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 10]
10. Use a formerly licensed main facility as an auxiliary facility. Is this application being filed pursuant to 47 C.F.R. Section 73.1675(c)(1) to request authorization to use a formerly licensed main facility as an auxiliary facility and/or change the ERP of the proposed auxiliary facility?	<input type="radio"/> Yes <input type="radio"/> No

If "Yes" to the above, the applicant certifies the following:		
a. Auxiliary antenna service area. The proposed auxiliary facility complies with 47 C.F.R. Section 73.1675(a). Exhibit is required.		<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 11]
b. Environmental Protection Act. The proposed facility is excluded from environmental processing under 47 C.F.R. Section 1.1 306 (i.e., the facility will not have a significant environmental impact and complies with the maximum permissible radiofrequency electromagnetic exposure limits for controlled and uncontrolled environments). By checking "Yes" above, the applicant also certifies that it, in coordination with other users of the site, will reduce power or cease operation as necessary to protect persons having access to the site, tower or antenna from radiofrequency electromagnetic exposure in excess of FCC guidelines.		<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 12]
11. Change the license status. Is this application being filed pursuant to 47 C.F.R. Section 73.1690(c)(9) to change the license status from commercial to noncommercial or from noncommercial to commercial? If "Yes" to above, submit an exhibit providing full particulars. For applications changing license status from commercial to noncommercial, include Section II of FCC Form 340 as an exhibit to this application.		<input type="radio"/> Yes <input type="radio"/> No [Exhibit 13]

PREPARER'S CERTIFICATION ON PAGE 6 MUST BE COMPLETED AND SIGNED

SECTION III - PREPARER'S CERTIFICATION

I certify that I have prepared Section III (Engineering data) on behalf of the applicant, and that after such preparation, I have examined and found it to be accurate and true to the best of my knowledge and belief.

Name W. JEFFREY REYNOLDS		Relationship to Applicant (e.g., Consulting Engineer) TECHNICAL CONSULTANT	
Signature		Date 8/6/2008	
Mailing Address DU TREIL, LUNDIN & RACKLEY, INC. 201 FLETCHER AVENUE			
City SARASOTA	State or Country (if foreign address) FL	Zip Code 34237 - 6019	
Telephone Number (include area code) 9413296000	E-Mail Address (if available) JEFF@DLR.COM		

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Exhibits

FCC MB - CDBS Electronic Filing
Application Reference Number: 20080808ACP
Successfully filed at Aug 8 2008 5:04PM

A Fee Payment is Required for this application. The Total Fee is \$270.

You can use the FCC's Electronic Form 159 System to pay electronically and/or to print out an appropriate Form 159. Press the button below now or return to this screen later by pressing the "Pay Fee" button on the CDBS Main Menu/ Informal Menu. See the [CDBS User's Guide](#) for more information about fee payment.

[Electronic Form 159](#)[Return to Main Menu](#)[Logout](#)

Payment must be received by US Bank within 14 (calendar) days of the date that the application is officially received by the Media Bureau's electronic filing system (indicated by the reference number above). This deadline applies to any payment submission method (electronic or via a paper check). If payment is not received in time, the filed application will be considered to be **not paid** and will therefore not be processed by the MB.

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0837 (June 2002)	FOR FCC USE ONLY
FCC 302-DTV		
APPLICATION FOR DIGITAL TELEVISION BROADCAST STATION LICENSE		FOR COMMISSION USE ONLY FILE NO. - 20060721ABF
Read INSTRUCTIONS Before Filling Out Form		

Section I - General Information

1.	Legal Name of the Applicant 54 BROADCASTING, INC.		
	Mailing Address P.O. BOX 684647		
	City AUSTIN	State or Country (if foreign address) TX	ZIP Code 78768 - 4647
	Telephone Number (include area code) 5124785400		E-Mail Address (if available)
	FCC Registration Number: 0006564959	Call Sign KNVA-DT	Facility Identifier 144
2.	Contact Representative (if other than Applicant) BARRY A. FRIEDMAN		Firm or Company Name THOMPSON HINE LLP
	Telephone Number (include area code) 2023318800		E-Mail Address (if available) BFRIEDMAN@THF.COM
3.	If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114): <input type="radio"/> Governmental Entity <input type="radio"/> Noncommercial Educational Licensee/Permittee <input type="radio"/> Other <input checked="" type="radio"/> N/A (Fee Required)		
4.	Facility Information:		
	a. <input checked="" type="radio"/> Commercial		<input type="radio"/> Noncommercial
	b. <input checked="" type="radio"/> Main		<input type="radio"/> Auxiliary
	c. Community of License:		
	City: AUSTIN		State: TX
5.	Program Test Authority:		
	<input type="radio"/> Requesting program test authority.		
	<input checked="" type="radio"/> Station operating pursuant to automatic program test authority (47 C.F.R. Section 73.1620(a)(1)).		
6.	Purpose of Application:		
	<input checked="" type="radio"/> Cover construction permit (list original construction permit file number -- starts with the prefix BPCDT, BPEDT, BMPCDT or BPMEDT):		BPCDT- 19991025ADB
	<input type="radio"/> Modify an authorized license (list license file number -- starts with the prefix BLCDT, BMLCDT or BMLEDT):		-
	<input type="radio"/> Amend a pending application If an amendment, submit as an Exhibit a listing by Section and Question Number the portions of the pending application that are being revised.		[Exhibit 1]

NOTE: In addition to the information called for in this section, an explanatory exhibit providing full particulars must

be submitted for each question for which a "No" response is provided.

Section II - Legal

1.	Certification. Licensee/Permittee certifies that it has answered each question in this application based on its review of the application instructions and worksheets. Licensee/Permittee further certifies that where it has made an affirmative certification below, this certification constitutes its representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets.	<input checked="" type="radio"/> Yes <input type="radio"/> No
2.	Licensee/Permittee certifies that all terms, conditions, and obligations set forth in the underlying construction permit have been fully met.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 2]
3.	Licensee/Permittee certifies that, apart from changes already reported, no cause or circumstance has arisen since the grant of the underlying construction permit which would result in any statement or representation contained in the construction permit application to be now incorrect.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 3]
4.	Character Issues. Licensee/Permittee certifies that neither licensee/permittee nor any party to the application has or has had any interest in, or connection with: a. any broadcast application in any proceeding where character issues were left unresolved or were resolved adversely against the applicant or party to the application; or b. any pending broadcast application in which character issues have been raised.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 4]
5.	Adverse Findings. Licensee/Permittee certifies that, with respect to the licensee/permittee and any party to the application, no adverse finding has been made, nor has an adverse final action been taken by any court or administrative body in a civil or criminal proceeding brought under the provisions of any law related to the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 5]
6.	Anti-Drug Abuse Act Certification. Licensee/Permittee certifies that neither licensee/permittee nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.	<input checked="" type="radio"/> Yes <input type="radio"/> No
I certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations. I hereby waive any claim to the use of any particular frequency as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and request an authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)		
Typed or Printed Name of Person Signing MARK GOLDBERG		Typed or Printed Title of Person Signing PRESIDENT
Signature		Date 7/21/2006

Section III - Engineering

TECHNICAL SPECIFICATIONS

Ensure that the specifications below are accurate. Contradicting data found elsewhere in this application will be disregarded. All items must be completed. The response "on file" is not acceptable.

TECH BOX

1.	Channel: 49		
2.	Operating Constants		
	Transmitter power output (average power at input to transmission line, after any filter attached to the transmitter, if used)		Transmission line power loss
	9.82 dBk 9.6 kW		1.19 dB
	Antenna Input power	Maximum antenna power gain	Maximum effective radiated power
	8.63 dBk	14.31 dB	22.94 dBk 197 kW
3.	Antenna Data		
	Manufacturer DIE	Model TFU-30GTH O4	
NOTE: In addition to the information called for in this section, an explanatory exhibit providing full particulars must be submitted for each question for which a "No" response is provided.			
CERTIFICATION			
4.	Main Studio Location. The main studio location complies with 47 C.F.R. Section 73.1125.		<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 6]
5.	Constructed Facility The facility was constructed as authorized in the underlying construction permit or complies with 47 C.F.R. Section 73.1690.		<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 7]
6.	Special Operating Conditions. The facility was constructed in compliance with all special operating conditions, terms, and obligations described in the construction permit. An exhibit may be required. Review the underlying construction permit		<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 8]
7.	Transmitter. The transmitter complies with 47 C.F.R. Section 73.1660.		<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 9]

APPLICATION FILED PURSUANT TO 47 C.F.R. SECTIONS 73.1675(c) OR 73.1690(c).

Only applicants filing this application pursuant to 47 C.F.R. Sections 73.1675(c) or 73.1690(c) must complete the following section.

8.	Changing transmitter power output. Is this application being filed to authorize a change in transmitter power output caused by the replacement of an omnidirectional antenna with another omnidirectional antenna or an alteration of the transmission line system? See 47 C.F.R. Sections 73.1690(c)(1) and (c)(10).	<input type="radio"/> Yes <input type="radio"/> No
9.	Replacing a directional antenna. Is this application being filed pursuant to 47 C.F.R. Section 73.1690(c)(3) to replace a directional antenna with another directional antenna? If "Yes" to the above, the applicant certifies the following:	<input type="radio"/> Yes <input type="radio"/> No

	a. Pattern of Directional Antenna. The proposed theoretical antenna pattern complies with 47 C.F.R. Section 73.1690(c)(3). Exhibit is required.	<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 10]
10	Use a formerly licensed main facility as an auxiliary facility. Is this application being filed pursuant to 47 C.F.R. Section 73.1675(c)(1) to request authorization to use a formerly licensed main facility as an auxiliary facility and/or change the ERP of the proposed auxiliary facility? If "Yes" to the above, the applicant certifies the following:	<input type="radio"/> Yes <input type="radio"/> No
	a. Auxiliary antenna service area. The proposed auxiliary facility complies with 47 C.F.R. Section 73.1675(a). Exhibit is required.	<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 11]
	b. Environmental Protection Act. The proposed facility is excluded from environmental processing under 47 C.F.R. Section 1.1 306 (i.e., the facility will not have a significant environmental impact and complies with the maximum permissible radiofrequency electromagnetic exposure limits for controlled and uncontrolled environments). By checking "Yes" above, the applicant also certifies that it, in coordination with other users of the site, will reduce power or cease operation as necessary to protect persons having access to the site, tower or antenna from radiofrequency electromagnetic exposure in excess of FCC guidelines.	<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 12]
11	Change the license status. Is this application being filed pursuant to 47 C.F.R. Section 73.1690(c)(9) to change the license status from commercial to noncommercial or from noncommercial to commercial? If "Yes" to above, submit an exhibit providing full particulars. For applications changing license status from commercial to noncommercial, include Section II of FCC Form 340 as an exhibit to this application.	<input type="radio"/> Yes <input type="radio"/> No [Exhibit 13]

PREPARER'S CERTIFICATION ON PAGE 6 MUST BE COMPLETED AND SIGNED

SECTION III - PREPARER'S CERTIFICATION

I certify that I have prepared Section III (Engineering data) on behalf of the applicant, and that after such preparation, I have examined and found it to be accurate and true to the best of my knowledge and belief.

Name W. JEFFREY REYNOLDS		Relationship to Applicant (e.g., Consulting Engineer) TECHNICAL CONSULTANT	
Signature		Date 7/21/2006	
Mailing Address DU TREIL, LUNDIN & RACKLEY, INC. 201 FLETCHER AVENUE			
City SARASOTA	State or Country (if foreign address) FL	Zip Code 3427 - 6019	
Telephone Number (include area code)		E-Mail Address (if available)	

9413296000

JEFF@DLR.COM

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Exhibits

FCC MB - CDBS Electronic Filing
Application Reference Number: 20060721ABF
Successfully filed at Jul 21 2006 12:28PM

A Fee Payment is Required for this application. The Total Fee is \$250.

You can use the FCC's Electronic Form 159 System to pay electronically and/or to print out an appropriate Form 159. Press the button below now or return to this screen later by pressing the "Pay Fee" button on the CDBS Main Menu/ Informal Menu. See the [CDBS User's Guide](#) for more information about fee payment.

[Electronic Form 159](#)

[Return to Main Menu](#)

Payment must be received by Mellon Bank within 14 (calendar) days of the date that the application is officially received by the Media Bureau's electronic filing system (indicated by the reference number above). This deadline applies to any payment submission method (electronic or via a paper check). If payment is not received in time, the filed application will be considered to be **not paid** and will therefore not be processed by the MB.